



Robert F. McDonnell
Governor

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Secretary of
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COMMONWEALTH of VIRGINIA

DEPARTMENT OF
HOUSING AND COMMUNITY DEVELOPMENT

William C. Shelton
Director

**VIRGINIA MANUFACTURED HOUSING BOARD
APPLICATION FOR LICENSURE**

SPECIAL (TEMPORARY)

1. Type of Application: () Dealer () Manufacturer () Broker () Salesperson
2. Current License Number and Name of Applicant for Temporary Location as Licensed by the Virginia Manufactured Housing Board:

(License Number)

(Name of Business)

3. Name of Applicant: _____
4. Phone Number for Applicant: _____
5. E-mail Address for Applicant: _____
6. Phone Number at Temporary Location: _____
7. Specify the City, County or Town that Temporary Operation is to be located
8. Physical Address of Temporary Location:

9. Specify Business Hours of Operation at Temporary Location: _____
10. Please read and sign the "Statement of Compliance"

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SPECIAL LICENSURE
STATEMENT OF COMPLIANCE

I _____ certify that I am familiar with the
(Name of Applicant print your name)
Manufactured Housing Licensing and Transaction Recovery Fund Regulations and other laws which govern the manufactured housing industry, and that I am in compliance with all such laws and regulations, and that the answers contained in the foregoing application are true and correct and that I have the authority to sign this application and answer the questions contained therein.

Name of Business: _____

Signature of Applicant: _____

Date of Signature: _____

NOTE:

Return the completed application with a check or money order made payable to the “**Treasurer of Virginia**” and mail to the following address:

Virginia Department of Housing and Community Development
Division of Building & Fire Regulation
P.O. Box 652
Richmond, VA 23218-0652

(Please see the Instructions for the applicable fees.)